

EV121318446US

PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PRO
S-
22154
221061055

07/31/03

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Reissue
Washington, DC 20231

Attorney Docket No.	1001/226
First Named Inventor	Cotichini, et al.
Original Patent Number	6,269,392
Original Patent Issue Date (Month/Day/Year)	07/31/2001
Express Mail Label No.	EV121318446US

APPLICATION FOR REISSUE OF: Utility Patent Design Patent Plant Patent
(Check applicable box)

APPLICATION ELEMENTS (37 CFR 1.173)

1. Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status. See 37 CFR 1.27.
3. Specification and Claims in double column copy of patent format (amended, if appropriate)
4. Drawing(s) (proposed amendments, if appropriate)
5. Reissue Oath/Declaration (original or copy) (**Unsigned**)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. Power of Attorney
7. Original U.S. Patent currently assigned? Yes No
(If Yes, check applicable box(es))
 - Written Consent of all Assignees (PTO/SB/53) (**Unsigned**)
 - 37 C.F.R. § 3.73(b) Statement (**Unsigned**)
(PTO/SB/96)
8. CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i CD-ROM (2 copies) or CD-R (2 copies); or
 - ii paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. Original U.S. Patent for surrender
 - Ribboned Original Patent Grant
 - Statement of Loss (PTO/SB/55)
12. Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
14. English Translation of Reissue Oath/Declaration
(if applicable)
15. Preliminary Amendment
16. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: _____

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **26588** or Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	Wen Liu			
Address	LIU & LIU 811 West 7th Street, Suite 1100			Zip Code 90017
City	Los Angeles	State	CA	Fax (213) 830-5741
Country	USA	Telephone	(213) 830-5740	

NAME <i>(Print/Type)</i>	WEN LIU	Registration No. (Attorney/Agent)	32,822
Signature	<i>Wen Liu</i>	Date	07/31/2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) 1001/226			
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 47	Total Claims (37 CFR 1.16(j))	(B) 47	**** 0 =	x \$ _____ =	or	x \$ _____ =		
(C) 6	Independent claims (37 CFR 1.16(i))	(D) 6	* 0 =	x \$ _____ =		x \$ _____ =		
Basic Fee (37 CFR 1.16(h)) \$ _____							\$ _____	
Total Filing Fee \$ _____					OR	\$ _____		
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	*** 48	MINUS	** 47	* = 1 x \$ _____ =	or	x \$ _____ =		
Independent Claims (37 CFR 1.16(i))	*** 7	MINUS	***** 6	= 1 x \$ _____ =		x \$ _____ =		
Total Additional Fee \$ _____						OR	\$ _____	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p>								
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 501288 (except the filing fee for this application) A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 0.00 to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
 <hr/> Signature of Applicant, Attorney or Agent of Record								
07/31/2003 Date								
WEN LIU (Reg. No. 32,822) <hr/> Typed or printed name								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: COTICHINI, ET AL.Application No./Patent No.: 6,269,392 Filed/Issue Date: July 31, 2001
Entitled: METHOD AND APPARATUS TO MONITOR AND LOCATE AN ELECTRONIC DEVICE USING
ABSOLUTE SOFTWARE CORP. A SECURED INTELLIGENT AGENT, a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 09036, Frame 0969, or for which a copy thereof is attached.

OR

- B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

[] Additional documents in the chain of title are listed on a supplemental sheet.

- Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (*i.e.*, the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Date_____
Typed or printed name_____
Signature_____
Title

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) 1001/226				
<p>This is part of the application for a reissue patent based on the original patent identified below.</p> <p>Name of Patentee(s) COTICHINI, ET AL..</p> <table border="1"> <tr> <td>Patent Number 6,269,392</td> <td>Date Patent Issued July 31, 2001</td> </tr> <tr> <td colspan="2">Title of Invention METHOD AND APPARATUS TO MONITOR AND LOCATE AN ELECTRONIC DEVICE USING A SECURED INTELLIGENT AGENT</td> </tr> </table> <p>1. <input checked="" type="checkbox"/> Filed herein is a statement under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent is in effect.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee". The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>			Patent Number 6,269,392	Date Patent Issued July 31, 2001	Title of Invention METHOD AND APPARATUS TO MONITOR AND LOCATE AN ELECTRONIC DEVICE USING A SECURED INTELLIGENT AGENT	
Patent Number 6,269,392	Date Patent Issued July 31, 2001					
Title of Invention METHOD AND APPARATUS TO MONITOR AND LOCATE AN ELECTRONIC DEVICE USING A SECURED INTELLIGENT AGENT						
<p>The assignee(s) owning an undivided interest in said original patent is/are ABSOLUTE SOFTWARE CORP., and the assignee(s) consents to the accompanying application for reissue.</p>						
<p>Name of assignee/inventor (if not assigned)</p>						
Signature	Date					
<p>Typed or printed name and title of person signing for assignee (if assigned)</p>						

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.